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UNITED STATES
CURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D
NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

	158	51/8	65				
		OMB APPROVAL					
	OMB Number:						
	SEC USE ONLY						
,	Prefix	<u>_</u> _	Se	rial			
		1	1				
		DATE F	RECEIVED				
i		1	1				

100001

Name of Offering (check if this is an	amendment and name h	as changed, and ir	idicate change.)				
Stateside Liberty Drilling Program Limite	d Partnership			CMA	1		
Filing Under (Check box(es) that apply):	☐ Rule 504	☐ Rule 505	Rule 506	Section 4(8)	J:AFOE 語		
Type of Filing: New Filing	☐ Amendment			12 JAN	100		
	A. BASIC	IDENTIFICAT	ION DATA		2 4 20 KE		
1. Enter the information requested about	he issuer			[0]	2007		
Name of Issuer	amendment and name ha	as changed, and in	dicate change.	<i>\6</i> /186			
Stateside Liberty Drilling Program Limite	d Partnership			110	SECTION		
Address of Executive Offices		(Number and Stree	t, City, State, Zip Co	ode) Telephone Numb	er (Including Area Code)		
1031 Ives Dairy Road, #228, North Miami	Beach, Florida 33179			(866) 805-6427	/		
Address of Principal Offices		(Number and Stree	t, City, State, Zip Co	ode) Telephone Numb	er (Including Area Code)		
(if different from Executive Offices)							
Brief Description of Business:				// //	PROCESSES		
Brief Description of Business: Exploration for and development of oil and natural gas properties. PROCESSED							
Type of Business Organization					IAM 2 0 coom		
`corporation		artnership, already		other (please speci	_{fy)} JAN 29 2007		
□ business trust .		artnership, to be fo	med		THOMSON		
	Mo	nth Year			FINANCIAL		
Actual or Estimated Date of Incorporation or	Organization:	7 2007	☐ Ac	ctual 🔯 Estimated			
Jurisdiction of Incorporation or Organization	(Enter two-letter U.S. Po	ostal Service Abbre	eviation for State;				
	CN	l for Canada; FN fo	r other foreign jurisd	liction) PA			

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offening, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Les.		A BASICI	DENTIFICATION DATA	Δ	3			
 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. 								
Check Box(es) that Apply:	☑ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner			
Full Name (Last name first, i								
Stateside Energy Group, L		Charact City Chats 7:- C-						
Business or Residence Addr 1031 Ives Dairy Road, #228	•	•	de):					
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner		□ Director	☐ General and/or Managing Partner			
Full Name (Last name first, i	f individual):							
Business or Residence Addr	ess (Number and	Street, City, State, Zip Co.	de):					
1031 Ives Dairy Road, #228	•	•	•					
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	General and/or Managing Partner			
Full Name (Last name first, i Benjamin S. Frindel *	f individual):							
Business or Residence Addr	ess (Number and	Street, City, State, Zip Coo	de):					
1031 Ives Dairy Road, #228	<mark>, North Miami Be</mark>	ach, Florida 33179						
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☑ Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, i Glenn F. Powell *	f individual):							
Business or Residence Addr	ess (Number and	Street, City, State, Zip Coo	de):		•			
1031 Ives Dairy Road, #228		_						
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, i	f individual):							
Business or Residence Addr	ess (Number and	Street, City, State, Zip Coo	de):		· · · · · · · · · · · · · · · · · · ·			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner			
Full Name (Last name first, i	f individual):							
Business or Residence Address (Number and Street, City, State, Zip Code):								
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner			
Full Name (Last name first, i	f individual):		•					
Business or Residence Address (Number and Street, City, State, Zip Code):								
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner			
Full Name (Last name first, i	f individual):				•			
Business or Residence Addr	Business or Residence Address (Number and Street, City, State, Zip Code):							
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner			
L	(Use b	lank sheet, or copy and us	se additional copies of this sh	eet, as necessary)			

* Indicates position held with Stateside Energy Group, LLC, the managing general partner:

B. INFORMATION ABOUT OFFERING Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?..... ☐ Yes ☒ No Answer also in Appendix, Column 2, if filing under ULOE. What is the minimum investment that will be accepted from any individual? \$32,700 * * Unless the Managing General Partner agrees, in its sole discretion, to accept a lesser amount. Does the offering permit joint ownership of a single unit?.... ☑ Yes ! ☐ No 3. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. N/A Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)..... ☐ All States □ [AL] \square [AK] \square [AZ] \square [AR] \square [CA] \square [CO] \square [CT] \square [DE] \square [DC] \square [FL] □ [GA] □ [HI] \square [KS] \square [KY] \square [LA] \square [ME] \square [MD] \square [MA] \square [MI] □ [IA] \square [MT] \square [NE] \square [NV] \square [NH] \square [NJ] \square [NM] \square [NY] \square [NC] \square [ND] \square [OH] \square [OK] \square [OR] \square [PA] □ [WY] □ [PR] Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)..... □ All States □ [AL] □ [AK] □ [AZ] ☐ [AR] ☐ [CA] ☐ [CO] ☐ [CT] ☐ [DE] ☐ [DC] ☐ [FL] ☐ [GA] ☐ [HI] □ [KY] \square [LA] \square [ME] \square [MD] \square [MA] \square [MI] \square [MN] \square [MS] \square [MO] □ [RI] Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)..... ☐ All States ☐ [AL] ☐ [AK] ☐ [AZ] □ (IN) □ [IA] ☐ [KS] \square [LA] \square [ME] \square [MD] \square [MA] \square [MI] \square [MN] \square [MS] \square [MO] □ [RI] (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

C. OFFERIO EN CERTEXXE LEXICAL TO THE CONTROL OF TH

۱.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already		,		
	exchanged. Type of Security	,	Aggregate Offering Price		Amount Already Sold
	Debt	\$	0.00	\$	
	Equity	\$	0.00	\$	· —
	☐ Common ☐ Preferred		,		
	Convertible Securities (including warrants)	\$	0.00	\$	
	Partnership Interests	\$	654,000.00	<u>\$</u>	0.00
	Other (Specify)	\$	0.00	\$	
	Total	\$	654,000.00	<u>\$</u>	0.00
	Answer also in Appendix, Column 3, if filing under ULOE		•		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." ** Since this offering has not closed as of the date of this filling, these amounts cannot be finally determined at this time.		Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors		0 ↔	\$	0.00 **
	Non-accredited Investors		0 ** :	\$ \$	0.00 **
	Total (for filings under Rule 504 only)		ı		
	Answer also in Appendix, Column 4, if filing under ULOE				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C–Question 1.		Types of		Dollar Amount
	Type of Offering		Types of Security		Sold
	Rule 505			<u>\$</u>	· · · · · · · · · · · · · · · · · · ·
	Regulation A			\$	
	Rule 504			<u>\$</u>	
	Total			<u>\$</u>	<u> </u>
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		i		
	Transfer Agent's Fees		. 🗆 '	\$	0
	Printing and Engraving Costs		. 🗖 '	\$	0
	Legal Fees		. 🛛		25,000.00
	Accounting Fees			\$	0
	Engineering Fees		. 🗆 🖠	\$	0
	Sales Commissions (specify finders' fees separately)			\$	0
	Other Expenses (identify)		. 🗆 ,	\$. 0
•	Total		. 🛛	\$	25,000.00

*	e organiciano anno a	KINDSIIIVI ESIMOKOPENYKE	NSES/A	ט טעויי	SEIGISTRO	CEEDS	
4	b. Enter the difference between the aggregate offering Question 1 and total expenses furnished in response to P "adjusted gross proceeds to the issuer."	art C-Question 4.a. This differen	ce is the		1	<u>\$</u>	629,000.00
5	Indicate below the amount of the adjusted gross proceeds used for each of the purposes shown. If the amount for a estimate and check the box to the left of the estimate. Th the adjusted gross proceeds to the issuer set forth in resp	ny purpose is not known, fumish le total of the payments listed mus	an st equal		Payments to Officers, Directors & Affiliates		Payments to Others
	Salaries and fees			\$	ı	_ 🗆	\$
	Purchase of real estate	······		\$		_ 🗆	\$
	Purchase, rental or leasing and installation of mac	hinery and equipment		\$	'		\$
	Construction or leasing of plant buildings and facili	ities		\$		_ 🗆	\$
	Acquisition of other businesses (including the valu offering that may be used in exchange for the asse pursuant to a merger	ets or securities of another issuer		<u>\$</u>		. 0	<u>\$</u>
	Repayment of indebtedness			\$			<u>\$</u>
	Working capital			\$		_ 🗆	\$
	Other (specify): Expenses and costs in connection	n with exploring for and		\$		_ 🗆	\$
	developing oil and natural gas.		\boxtimes	\$	629,000.00	_ 🗆	\$
	Column Totals	•••••••••••••••••••••••••••••••••••••••	⊠	\$	629,000.00	_ 🗆	\$
	Total payments Listed (column totals added)			•	⊠ <u>*</u>	629,	000.00
		d Hadayaran	B.K.		10.4%	el Mar	
cor	issuer has duly caused this notice to be signed by the un stitutes an undertaking by the issuer to fumish to the U.S. ne issuer to any non-accredited investor pursuant to parag	Securities and Exchange Commi	n. If this no ssion, upo	ptice is to n writte	filed under Rule n request of its	505, the staff, the	following signature information furnished
	er (Print or Type) eside Liberty Drilling Program Limited Partnership	Signature	X>		> D	ate /-	23-07
	ne of Signer (Print or Type) ert V. Pastorius	Title of Signer (Print or Type) President & CEO of Stateside	Energy Gr	oup, L	LC, the Manag	ing Gene	eral Partner
_	<u>- </u>				<u></u>	_	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)